Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is a amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Join	t Case):
1.	Your full name			
	Write the name that is on your government-issued	HASSAN First name	First name	
	picture identification (for example, your driver's	MOHAMAD	i iist name	
	license or passport).	Middle name	Middle name	
	Bring your picture identification to your meeting with the trustee.	MOHAMAD  Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0389		

Del	otor 1 HASSAN MOHAM	AD MOHAMAD	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EIN	EIN
5.	Where you live	113-21 UNION TURNPIKE	If Debtor 2 lives at a different address:
		SECOND FLOOR FOREST HILLS, NY 11375	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Queens County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason.
		Explain. (See 28 U.S.C. § 1408.)	Explain. (See 28 U.S.C. § 1408.)

Debtor 1 HASSAN MOHAMAD MOHAMAD Case number (if known)

•	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chap	ter 7						
		☐ Chap	ter 11						
		☐ Chap	ter 12						
		☐ Chap	ter 13						
-	How you will pay the fee	abo ord	out how y der. If you	ou may pay. Typica	lly, if you are paying the fee yo	k with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with			
						on, sign and attach the Application for Individuals to Pay			
			The Filing Fee in Installments (Official Form 103A).  I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By						
		but app	t is not re	quired to, waive you our family size and y	r fee, and may do so only if yo ou are unable to pay the fee ir	in this in you are filling for Criapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.			
	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes.							
			District		When	Case number			
			District	: 	When	Case number			
			District		When	Case number			
0.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor	·		Relationship to you			
			District	:	When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
	Do you rent your ☐ No.		Go to	line 12.					
1.	Do you rent your				at a contract of the contract of the contract of	+ 1/01/2			
1.	Do you rent your residence?	Yes.	Has y	our landlord obtaine	d an eviction judgment agains	i you?			
1.		_	Has y ■	our landlord obtaine  No. Go to line 12.	a an eviction judgment agains	t you!			

11/06/20 12:49PM Debtor 1 HASSAN MOHAMAD MOHAMAD Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, Bankruptcy Code, and are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). debtor or a debtor as defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs

Number, Street, City, State & Zip Code

urgent repairs?

#### Debtor 1 HASSAN MOHAMAD MOHAMAD

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 HASSAN MOHAMAD MOHAMAD			AMAD	Case number (if known)				
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.			ed in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe th	at are not consumer debts or business	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		Yes					
18.	How many Creditors do	<b>■</b> 1-49		☐ 1,000-5,000	<b>2</b> 5,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000			
		☐ 100-1 ☐ 200-9		10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to	\$0 - \$		☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion			
	be worth?	□ \$100,	01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities	\$0 - \$	· ·	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?	□ \$50,001 - \$100,000 □ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
Par	t 7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
			If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
			rney represents me and I did not pa nt, I have obtained and read the noti	y or agree to pay someone who is not ce required by 11 U.S.C. § 342(b).	an attorney to help me fill out this			
		I request	relief in accordance with the chapte	er of title 11, United States Code, spec	ified in this petition.			
			cy case can result in fines up to \$25		property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		HASSA	SAN MOHAMAD MOHAMAD N MOHAMAD MOHAMAD e of Debtor 1	Signature of Debtor	2			
		Executed	MM / DD / YYYY	Executed on MM /	/ DD / YYYY			

11/06/20 12:49PM Debtor 1 HASSAN MOHAMAD MOHAMAD Case number (if known) For your attorney, if you are I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter represented by one for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the If you are not represented by an attorney, you do not need schedules filed with the petition is incorrect. to file this page. /s/ Karamvir Dahiya Date November 6, 2020 MM / DD / YYYY Signature of Attorney for Debtor Karamvir Dahiya Printed name Dahiya Law Offices, LLC Firm name 75 Maiden Lane Suite 506 **New York** New York, NY 10038 Number, Street, City, State & ZIP Code

Email address

Contact phone **2127668000** 

2860443 NY Bar number & State karam@bankruptcypundit.com

Fill in this in	formation to identify your	case:				
Debtor 1	HASSAN MOHAN					
Debtor 2	First Name	Middle Name	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK			
Case number					_	if this is an
					amend	ded filing
Official I	Form 106Sum					
		and Liabilities a	and Certain Statistical In	formation	1	2/15
information.	Fill out all of your schedule	es first; then complete	ole are filing together, both are equal the information on this form. If you eck the box at the top of this page.			
Part 1: Su	mmarize Your Assets					
					Your as Value o	ssets f what you own
1. Schedu 1a. Cop	le A/B: Property (Official For y line 55, Total real estate, for	orm 106A/B) rom Schedule A/B			\$	0.00
1b. Cop	y line 62, Total personal pro	perty, from Schedule A/E	3		\$	8,970.00
1c. Cop	/ line 63, Total of all property	y on Schedule A/B			\$	8,970.00
Part 2: Su	mmarize Your Liabilities					
						abilities you owe
	le D: Creditors Who Have Co y the total you listed in Colu		rty (Official Form 106D) at the bottom of the last page of Part 1	of Schedule D	\$	10,687.00
	le E/F: Creditors Who Have y the total claims from Part		sial Form 106E/F) ims) from line 6e of <i>Schedule E/F</i>		\$	0.00
3b. Сор	y the total claims from Part	2 (nonpriority unsecured	I claims) from line 6j of Schedule E/F		\$	24,790.00
			Υοι	ur total liabilities	\$	35,477.00
Part 3: Su	mmarize Your Income and	Expenses				
	le I: Your Income (Official Four combined monthly incom		ıle I		\$	2,289.66
	le J: Your Expenses (Official ur monthly expenses from li				\$	3,191.00
Part 4: An	swer These Questions for	Administrative and Sta	atistical Records			
-	filing for bankruptcy under	•	3? Check this box and submit this form to	o the court with yo	ur other sch	edules.
■ Ye 7. <b>What ki</b>	s nd of debt do you have?					
<b>■</b> Yo	ur debts are primarily con		er debts are those "incurred by an indivi -9g for statistical purposes. 28 U.S.C.		a personal,	family, or
	ur debts are not primarily court with your other sched		nave nothing to report on this part of the	e form. Check this	box and su	ubmit this form to
Official Form	•		bilities and Certain Statistical Inform	nation	ŗ	page 1 of 2

Debtor 1 HASSAN MOHAMAD MOHAMAD

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,400.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

								11/06/20 12:49F
Fill in t	this info	ormation to identify y	our case a	nd this filing:				
Debtor	1	HASSAN MOF		Middle Name	Last Name			
Debtor	2	riiotranio		Wildle Hame	Last Namo			
(Spouse,		First Name		Middle Name	Last Name			
United	States E	Bankruptcy Court for th	o FAST	EDN DISTRICT O	E NEW YORK			
United	States	Sankrupicy Court for th	ie. LAST	LKN DISTRICT O	I NEW TORK			
Case n	umber							Check if this is an
								amended filing
Ott: o	:al <b>-</b>	orm 106 \/ D						
		orm 106A/B						
Sch	edu	ıle A/B: Pro	operty	/				12/15
					once. If an asset fits in more than on	e category, list the as	set in the	category where you
	ion. If m	ore space is needed, att			ed people are filing together, both ar m. On the top of any additional page			
Part 1:	Describ	oe Each Residence, Buil	ding, Land,	or Other Real Estate	e You Own or Have an Interest In			
1. <b>Do yo</b>	ou own o	r have any legal or equi	table interes	st in any residence,	building, land, or similar property?			
■ No	o. Go to P	Part 2.						
☐ Ye	s. Where	e is the property?						
	1							
Part 2:	Describ	e Your Vehicles						
<ol> <li>Cars</li> <li>No</li> <li>Ye</li> </ol>	)	trucks, tractors, spor	rt utility ve	hicles, motorcycl	es			
						Do not doduct consu		
3.1 N	Make:	ACURA TLX		Who has an inte	rest in the property? Check one			or exemptions. Put aims on Schedule D:
ľ	Model:			Debtor 1 only		Creditors Who Hav	e Claims S	Secured by Property.
`	Year:	2015		Debtor 2 only		Current value of the	ne Cı	urrent value of the
		nate mileage:	49000	Debtor 1 and I	•	entire property?	pc	ortion you own?
(	Other info	ormation:		☐ At least one of	f the debtors and another			
				Check if this (see instructions	is community property	\$8,000	00	\$8,000.00
					nal vehicles, other vehicles, and			
Exam	nples: Bo	oats, trailers, motors, p	ersonal wa	tercraft, fishing ve	ssels, snowmobiles, motorcycle ac	cessories		
■ No	=							
☐ Ye	es							
					ntries from Part 2, including any			\$8,000.00
.pay	oo you	nave anached für Fal	Z. VVIILE	at namber nere				·
Part 2	Docaril	e Your Personal and H	oueobold It.	ame.				
		r have any legal or ed			e following items?		Curi	rent value of the
Do you		ave any legal of et	14114116 1111	o.oocarany or th	o tonoming items :			ion you own?
							Do n	not deduct secured
							clain	ns or exemptions.

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

De	ebtor 1 HASSAN MO	HAMAD MOHAMAD		Case number (if known)	11/06/20 12:49
16.	□ No	nave in your wallet, in your ho	ome, in a safe deposit box, and on	hand when you file your petition	
				Cash	\$350.00
17.			ounts; certificates of deposit; shares s with the same institution, list each	s in credit unions, brokerage houses, a	ınd other similar
	■ Yes		Institution name:		
		CHECKING 17.1. ACCOUNT	TD BANK		\$120.00
18.		or publicly traded stocks investment accounts with bro	okerage firms, money market acco	unts	
19.				nesses, including an interest in an Ll	LC, partnership, and
	☐ Yes. Give specific info	ormation about them Name of entity:		% of ownership:	
20.	Negotiable instruments	include personal checks, cas	otiable and non-negotiable instrushiers' checks, promissory notes, a ansfer to someone by signing or de	nd money orders.	
	■ No □ Yes. Give specific info	rmation about them Issuer name:			
21.	Retirement or pension  Examples: Interests in II  No		403(b), thrift savings accounts, or o	ther pension or profit-sharing plans	
	☐ Yes. List each account	t separately.  Type of account:	Institution name:		
22.	Examples: Agreements	d deposits you have made so	o that you may continue service or public utilities (electric, gas, water)	use from a company , telecommunications companies, or ot	:hers
	■ No □ Yes		Institution name or individua	al:	
23.	_ `	r a periodic payment of mone	ey to you, either for life or for a num	nber of years)	
	■ No □ Yes Iss	suer name and description.			
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), 5		ualified ABLE program, or under	r a qualified state tuition program.	
		stitution name and description	n. Separately file the records of any	y interests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or fut ■ No	ure interests in property (o	other than anything listed in line	1), and rights or powers exercisable	for your benefit
	☐ Yes. Give specific info	ormation about them			
26.			nd other intellectual property eds from royalties and licensing agr	eements	
	Yes. Give specific info	ormation about them			

Schedule A/B: Property

Case 1-20-43921-ess Doc 1 Filed 11/06/20 Entered 11/06/20 12:50:23

Official Form 106A/B

De	ebtor 1	HASSAN MOHA	MAD MOHAMAD	Case number (if known)	11/06/20 12:49
	Examµ ■ No			ciation holdings, liquor licenses, professional license	s
Mo	oney or	property owed to yo	u?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
	■ No	funds owed to you Give specific informa	tion about them, including whether you	u already filed the returns and the tax years	
	Examp ■ No	support  ples: Past due or lump  Give specific informa		support, maintenance, divorce settlement, property	settlement
	Examp ■ No		lisability insurance payments, disability loans you made to someone else	y benefits, sick pay, vacation pay, workers' compen	sation, Social Security
31.	Interes Examp ■ No	sts in insurance poli oles: Health, disability	cies	ount (HSA); credit, homeowner's, or renter's insuran- ue. Beneficiary:	Surrender or refund
	If you a some o		•	as died life insurance policy, or are currently entitled to rece	value: ive property because
	Examµ ■ No		syment disputes, insurance claims, or	awsuit or made a demand for payment rights to sue	
	■ No	contingent and unlice  Describe each claim		luding counterclaims of the debtor and rights to	set off claims
	■ No	nancial assets you d			
36			l of your entries from Part 4, includi ber here	ing any entries for pages you have attached	\$470.00
Pa	rt 5: De	scribe Any Business-R	elated Property You Own or Have an Inte	erest In. List any real estate in Part 1.	
•	No. Go	own or have any legal of the Part 6. Go to line 38.	or equitable interest in any business-rela	ated property?	

Case 1-20-43921-ess Doc 1 Filed 11/06/20 Entered 11/06/20 12:50:23 11/06/20 12:49PM Debtor 1 HASSAN MOHAMAD MOHAMAD Case number (if known) Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$8,000.00 57. Part 3: Total personal and household items, line 15 \$500.00 58. Part 4: Total financial assets, line 36 \$470.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00

\$8,970.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$8,970.00

\$8,970.00

_						_	11/06/20 12:49PN
Fill	in this inform	ation to identify your	case:				
Deb	tor 1	HASSAN MOHAM			and Name		
Deb	tor 2	First Name	Middle Name	L	ast Name		
(Spou	use if, filing)	First Name	Middle Name	L	ast Name		
Unit	ed States Ban	kruptcy Court for the:	EASTERN DISTRICT OF NE	EW Y	ORK		
	e number						
(if kno	own)						Check if this is an amended filing
							amended ming
Off	icial For	m 106C					
Sc	hedule	C: The Pro	perty You Cla	im	as Exempt		4/19
the p need case For e spec any a fund exen to the	roperty you lised, fill out and number (if knowed hitem of particular amplicable states—may be unaption to a particable states—metion to a particable states—meticable states—me	ted on Schedule A/B: P l attach to this page as r own). property you claim as a count as exempt. Alteri atutory limit. Some exe alimited in dollar amou	roperty (Official Form 106A/B) nany copies of Part 2: Addition exempt, you must specify the natively, you may claim the functions—such as those for int. However, if you claim an and the value of the propert	as you nal Pa e amo ull fai healt exen	ther, both are equally responsible four source, list the property that younge as necessary. On the top of any count of the exemption you claim. It market value of the property but haids, rights to receive certain aption of 100% of fair market valletermined to exceed that amount	u claim as ex y additional p One way of eing exempt benefits, an ue under a l	tempt. If more space is bages, write your name and f doing so is to state a ted up to the amount of d tax-exempt retirement aw that limits the
			aiming? Check one only, eve	n if vo	ur engues is filing with you		
	_			•	, ,		
	_	-	nonbankruptcy exemptions.	11 0.8	5.C. § 522(D)(3)		
			ns. 11 U.S.C. § 522(b)(2)		Cli to the information halous		
	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
		on of the property and line hat lists this property	on Current value of the portion you own	Ame	ount of the exemption you claim	<b>Specific </b>	ws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	CELL PHON		\$500.00		\$500.00	NYCPLE	R § 5205(a)(5)
l	Line from <i>Sch</i>	edule A/B: <b>7.1</b>			100% of fair market value, up to any applicable statutory limit		
	Cash		\$350.00		\$350.00	NYCPLE	R § 5205(a)(9)
I	Line from <i>Sch</i>	edule A/B: <b>16.1</b>		_	100% of fair market value, up to any applicable statutory limit		
		ACCOUNT: TD BAN edule A/B: 17.1	K \$120.00		\$120.00	NYCPLE	R § 5205(a)(9)
ı	Line nom <i>Sch</i>	edule AVB. 17.1			100% of fair market value, up to any applicable statutory limit		
( 	(Subject to adj ■ No —	justment on 4/01/22 and	. ,	ises fi	led on or after the date of adjustme	,	

Official Form 106C

					<u></u>	11/06/20 12:49PM
Fill in this informat	tion to identify you	ır case:				
Debtor 1	HASSAN MOHA	MAD MOHAMAD				
-	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
(Spouse II, IIIIIIg)	i iist ivaille					
United States Bankı	ruptcy Court for the:	EASTERN DISTRICT OF NEW	YORK			
Case number					☐ Check	if this is an
, ,					_	led filing
Official Form Schedule D		Who Have Claims S	Secured	by Property	у	12/15
		If two married people are filing togethe out, number the entries, and attach it to				
1. Do any creditors ha	ive claims secured by	y your property?				
□ No. Check th	nis box and submit t	his form to the court with your other s	schedules. Yo	u have nothing else to	o report on this form.	
Yes. Fill in al	Il of the information	below.				
Part 1: List All S	Secured Claims					
2. List all secured cla	aims. If a creditor has i	more than one secured claim, list the cred	litor separately	Column A	Column B	Column C
for each claim. If more	e than one creditor has	a particular claim, list the other creditors cal order according to the creditor's name	in Part 2. As	Amount of claim  Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
	onda Finance	Describe the property that secures the	ne claim:	\$10,687.00	\$8,000.00	\$2,687.00
Creditor's Name		Automobile				
Attn: Nation Bankruptcy						
Po Box 166		As of the date you file, the claim is: C	Check all that			
Irving, TX 7		apply.  Contingent				
Number, Street, Cit	ty, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		An agreement you made (such as m	nortgage or secu	ıred		
Debtor 2 only		car loan)				
Debtor 1 and Debto		☐ Statutory lien (such as tax lien, mecl	hanic's lien)			
At least one of the		☐ Judgment lien from a lawsuit				
☐ Check if this clain community debt		☐ Other (including a right to offset)				
Date debt was incurre	Opened 02/16 Last Active ed 10/05/20	Last 4 digits of account numb	er 8971			
Add the dollar value	e of your entries in C	olumn A on this page. Write that numb	er here:	\$10,68	7.00	
	ge of your form, add	the dollar value totals from all pages.		\$10,68		
David C. Hart Other	an ta Da Natiti - 4 f -	Bahi Thai Van Almada la Laird				

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

								11/06/20 12:49PM
Fill in	this inform	ation to identify your	case:					
Debtor	r 1	HASSAN MOHAN	IAD MOHAN	IAD				
		First Name	Middle Na		Last Name			
Debtor	_							
(Spouse	if, filing)	First Name	Middle Na	ame	Last Name			
United	States Ban	kruptcy Court for the:	EASTERN [	DISTRICT OF NE	W YORK			
(if known	number n)			_				Check if this is an
							_	amended filing
- · · ·							<u>_</u>	
	ial Form							
<u>Sche</u>	edule E/	F: Creditors W	/ho Have	Unsecured	d Claims			12/15
Schedul Schedul Ieft. Atta	le G: Executorile D: Creditorile D: Creditorile Continue	ory Contracts and Unexp rs Who Have Claims Sec	oired Leases (Of cured by Proper ge. If you have r	fficial Form 106G). ty. If more space is no information to r	Do not include s needed, copy	any creditors wi the Part you nee	edule A/B: Property (Offic th partially secured claim d, fill it out, number the ei art. On the top of any add	s that are listed in ntries in the boxes on the
		s have priority unsecure						
_	No. Go to Pa		a olamo agam	. you.				
	Yes.	11 2.						
ш	Yes.							
Part 2	List All	of Your NONPRIORIT	Y Unsecured	Claims				
3. Do	any creditor	s have nonpriority unse	cured claims ag	ainst you?				
	No. You have	e nothing to report in this p	art. Submit this f	orm to the court wit	th vour other sche	edules.		
_					,			
_	Yes.							
uns tha	secured claim	, list the creditor separatel	y for each claim.	For each claim liste	ed, identify what t	type of claim it is.	im. If a creditor has more th Do not list claims already in unsecured claims fill out the	cluded in Part 1. If more
								Total claim
4.1	Cavalry I	Portfolio Services		Last 4 digits of ac	count number	3177		\$1,290.00
		Creditor's Name					_	<u> </u>
		mit Lake				-	/19 Last Active	
	Suite 400	NY 10595		When was the de	bt incurred?	01/19		_
		eet City State Zip Code		As of the date you	u file, the claim i	is: Check all that	apply	
	Who incurr	ed the debt? Check one.						
	Debtor 1	only		☐ Contingent				
	Debtor 2	? only		☐ Unliquidated				
	Debtor 1	and Debtor 2 only		☐ Disputed				
	☐ At least	one of the debtors and an	other	Type of NONPRIC	ORITY unsecured	d claim:		
	☐ Check in	f this claim is for a com	munity	☐ Student loans				
	debt Is the claim	subject to offset?		Obligations aris	sing out of a sepa aims	ration agreement	or divorce that you did not	
	■ No			☐ Debts to pension	on or profit-sharin	g plans, and othe	er similar debts	
	☐ Yes			Other. Specify	Collection	Attorney Citi	bank	_

Debto	1 HASSAN MOHAMAD MOHAMAD		Case number (if known)	
4.2	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	6853	\$6,140.00
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 04/16 Last Active 03/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	4076	\$5,723.00
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 08/16 Last Active 02/19	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	l	
4.4	Credit One Bank	Last 4 digits of account number	5100	\$101.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 08/20 Last Active 11/02/20	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane, and other similar debts	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	<u> </u>	

Debtor	1 HASSAN MOHAMAD MOHAMAD		Case number (if known)	
4.5	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	8805	\$3,614.00
	Attn: Bankruptcy Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 06/16 Last Active 3/18/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plane, and other similar debts	
		·		
	Yes	Other. Specify Credit Card	<u> </u>	
4.6	MRS BPO LLC Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
	1930 Olney Avenue Cherry Hill, NJ 08003	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	<u> </u>	☐ Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No			
	Yes	Other. Specify		
4.7	Portfolio Recovery Nonpriority Creditor's Name	Last 4 digits of account number	8202	\$1,335.00
	Attn: Bankruptcy 120 Corporate Blvd Norfolk, VA 23502	When was the debt incurred?	Opened 01/19 Last Active 04/18	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	☐ Yes	■ Other. Specify Bank	Company Account Synchrony	

Debtor	1 HASSAN MOHAMAD MOHAMAD		Case number (if known)	
	Portfolio Recovery Assoc. Nonpriority Creditor's Name	Last 4 digits of account number		\$1,335.00
	P.O. Box 12914 Norfolk, VA 23541	When was the debt incurred?		
-	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.9	Selip & Stylianou, LLP	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name PO Box 9012 Woodbury, NY 11797	When was the debt incurred?		
-	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify COLLECITI	NG AGAINST THE DEBTOR	
4.1	Wells Fargo Bank NA	Last 4 digits of account number	1955	\$5,252.00
	Nonpriority Creditor's Name	-		
	Attn: Bankruptcy 1 Home Campus Mac X2303-01a	When was the debt incurred?	Opened 06/16 Last Active 12/15/17	
-	Des Moines, IA 50328  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	d claim:	
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	a Gianni.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	■ Other. Specify Credit Card		
	· <del></del>	— Other. Specify		

1 HASSAN MOHAMAD MOHAMAD		Case number (if known)	
Wells Fargo Bank NA	Last 4 digits of account number	5730	\$0.0
Nonpriority Creditor's Name			
Attn: Bankruptcy	18/1	Opened 9/23/14 Last Active	
Po Box 10438 Des Moines, IA 50306	When was the debt incurred?	1/18/18	
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify Secured Cr	edit Card	

### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$ 0.00
	6h.	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 24,790.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 24,790.00

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this inform	nation to identify your				
Debtor 1	HASSAN MOHAM	AD MOHAMAD			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	OF NEW YORK		
Case number					
(if known)					☐ Check if this is an amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the , Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					<u></u>
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3	Oily		Oldio	Zii Godo	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
2.7	Name				_
	Number	Street			_
	Number	Olicci			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	,		<u> </u>		

Official Form 106G

					11/06/20 12:49PI
Fill in this	information to identify your	case:			
Debtor 1	HASSAN MOHAN	AD MOHAMAD			
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	EASTERN DISTRICT O	E NEW YORK		
Officed Sta	les Bankruptcy Court for the.	LASTERN DISTRICT O	I NEW TORK		
Case numb	ber				Chook if this is an
(ii kilowii)					Check if this is an amended filing
044	. =				·
	I Form 106H				
Sched	lule H: Your Cod	lebtors			12/15
No Yes  2. With Arizon  No. Yes  3. In Colin line Form	nin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. b. Did your spouse, former spo umn 1, list all of your codeb 2 again as a codebtor only 106D), Schedule E/F (Officia	u lived in a community property, Nevada, New Mexico, Publicate, or legal equivalent live tors. Do not include your if that person is a guaran	operty state or territor erto Rico, Texas, Wash with you at the time? spouse as a codebtor tor or cosigner. Make	ry? (Community property iington, and Wisconsin.) r if your spouse is filing sure you have listed th	y states and territories include g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
(	Dlumn 2.  Column 1: Your codebtor  Name, Number, Street, City, State and 2	IP Code		Column 2: The cre	editor to whom you owe the debt
0.4				_	11,
3.1	Name			□ Schedule D, line □ Schedule E/F, li	·
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2				Schedule D, line	e
	Name			☐ Schedule E/F, li	
_				☐ Schedule G, line	e
	Number Street City	State	ZIP Code		
	•				

						_				
	in this information to identify your total HASSA	our case: N MOHAMAD MOHAMAD	)							
	btor 2  buse, if filing)				_					
Uni	ited States Bankruptcy Court fo	or the: EASTERN DISTRIC	T OF NEW YORK							
	se number nown)		_			□ An		nt showin	g postpetition ollowing date:	
0	fficial Form 106I					M	M / DD/ Y	YYY		
S	chedule I: Your I	ncome								12/15
spo atta Pa	plying correct information. I use. If you are separated and ch a separate sheet to this for the correct of the	d your spouse is not filing worm. On the top of any addit	vith you, do not inclu	ude infor	mati	on about	your spo	use. If mo	ore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more than one jo		■ Employed				☐ Emplo	-		
	information about additional employers.		☐ Not employed	☐ Not employed			☐ Not en	nployed		
	. ,	Occupation	PART TIME EM	PLOYM	ENT	<u> </u>				
	Include part-time, seasonal, self-employed work.	Employer's name	BETTER CHOIC	CE HOM	E C	ARE_				
	Occupation may include stude or homemaker, if it applies.	dent Employer's address	7104 18TH AVE Brooklyn, NY 1	_						
		How long employed	there? 2 YEAI	RS						
Pai	rt 2: Give Details Abou	t Monthly Income								
	mate monthly income as of use unless you are separated.		f you have nothing to I	report for	any	line, write	\$0 in the	space. Ind	clude your noi	n-filing
	ou or your non-filing spouse ha e space, attach a separate sh		combine the information	on for all e	empl	oyers for th	hat persoi	n on the li	nes below. If	you need
						For Debt	tor 1		btor 2 or ng spouse	
2.		, salary, and commissions (lathly, calculate what the month		2.	\$	2,6	694.41	\$	N/A	
3.	Estimate and list monthly	overtime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income.	Add line 2 + line 3.		4.	\$	2,69	4.41	\$	N/A	

Debt	tor 1	HASSAN MOHAMAD MOHAMAD	_	Case	number (if known)			
				For	Debtor 1		Debtor 2 or filing spouse	
	Сор	y line 4 here	4.	\$	2,694.41	\$	N/A	
_				-		-		
5.		all payroll deductions:	_	•		•		
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$ \$	404.75	\$	N/A	
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b. 5c.	\$ 	0.00	\$ 	N/A N/A	
	5d.	Required repayments of retirement fund loans	5d.	<b>\$</b> —	0.00	\$ 	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$-	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	· \$	0.00	- \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	404.75	\$	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,289.66	\$	N/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	N/A	
	8e.	Social Security	8e.	\$_	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	* _	0.00	- \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$	:	2,289.66 + \$		N/A = \$ 2	2,289.66
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depen				chedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					Combine	
13.	Dον	ou expect an increase or decrease within the year after you file this form	?				monthly	income
-		No.						
		Yes. Explain:						

	: (h.: . : . (	Caracter School (Const								
	in this informa otor 1	tion to identify you		MOHAMAD			Che	ck if this is:		
								An amended filing		
	otor 2 ouse, if filing)							A supplement show 13 expenses as of	wing postpetition chapte the following date:	er
Unit	ted States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF NEV	W YORK			MM / DD / YYYY		
	se number (nown)									
		rm 106J								
		J: Your								2/15
info	ormation. If m		eded, atta	. If two married people ch another sheet to t n.						
Par		ibe Your House	hold							
1.	Is this a joir									
	■ No. Go to		in a separ	ate household?						
	□N		•							
	□ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Exper</i>	nses for S	Separate House	hold of Deb	otor 2.		
2.	Do you have	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent		ependent's relati ebtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state dependents								□ No □ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
3.	expenses of	oenses include f people other t d your depende	han 🗖	No Yes	_				□ Yes	
Por		ate Your Ongoi		y Evnoncos						
Est	timate your ex	penses as of y	our bankrı	uptcy filing date unles	ss you a	re using this fo ental <i>Schedule</i>	orm as a su J, check t	upplement in a Cha he box at the top o	apter 13 case to repor of the form and fill in th	t ne
Inc	lude expense	s paid for with	non-cash	government assistan	ce if you	know				
the		h assistance an		luded it on Schedule				Your exp	enses	
4.		or home owners and any rent for th		ses for your residence r lot.	ce. Includ	e first mortgage	e 4. S	<b>.</b>	1,500.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes					4a. S	\$	0.00	
		rty, homeowner's					4b. \$		0.00	
				ıpkeep expenses			4c. 9		0.00	
5.		owner's associat		dominium dues our residence, such as	e home o	auity loans	4d. 9 5. 9		0.00	
J.	Additional	tgage payiii	onio ioi ye	on residence, such as	S HOITIE E	quity idalis	J		0.00	

	Debtor 1		HASSAN	N MOHAMAD MOHAMAD	Case num	nber (if known)	_
Sea	6	Utiliti	ies:				
6b.   Water, sewer, garbage collection   6c.   5   0.00   6c.   7   7   7   7   7   7   7   7   7	0.			heat, natural gas	6a.	\$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. \$ 0.00 6d. Other. Specify: 6d. \$ 0.00 6d. Specify: 6d. \$ 0.00 6d. Other. Specify: 6d. \$ 0.00 6d. Specify: 6d. Specify: 6d. Specify: 6d. Specify: 6d. Specify: 6d. Specify: 6d. \$ 0.00 6d. Specify: 6d. Spe						·	
6d. Chier. Specify: Food and housekeeping supplies Childcare and children's education costs Childcare and children's ed							
Food and housekeeping supplies   7.   \$   \$   \$   \$   \$   \$   \$   \$   \$			•			·	
B. Childcare and children's education costs   B. \$   0.00	7.					· -	
10   10   10   10   10   10   10   10						·	
10.   Personal care products and services						·	
11. Medical and dental expenses  12. Transportation. Include gas, maintenance, bus or train fare:  Do not include car payments.  12. \$ 75.00  14. \$ 0.00  15. Instrainment, clubs, recreation, newspapers, magazines, and books  14. \$ 0.00  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. \$ 0.00  15b. Health insurance  15c. Vehicle insurance  15d. \$ 0.00  15d. Other insurance. Specify:  15d. \$ 0.00  15d. Other insurance. Specify:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. Other specify:  17d. Specify:  1			٠,	3.		·	
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Do not include car payments.  12. Sethertainment, clubs, recreation, newspapers, magazines, and books  13. \$ 100.00  14. Charitable contributions and religious donations  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance.  15c. Vehicle insurance. Specify:  15d. Other insurance. Specify:  15d. Other insurance. Specify:  16. \$ 266.00  17d. Car payments for Vehicle 1  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 1  17c. Other. Specify:  17d. Other payments of vehicle 2  17d. Car payments for Vehicle 2  17d. Car payments for Vehicle 2  17d. Car payments for Vehicle 3  17d. Car payments for Vehicle 3  17d. Car payments for Vehicle 4  17d. Car payments for Vehicle 5  17d. Conter. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other payments you make to support that you did not report as deducted from your pay on line 5. Schedule / Your Income (Official Form 106)).  18. Your payments you make to support others who do not live with you.  19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule / Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. Property, homeowner's, or renter's insurance  20c. Property, homeowner's, or renter's insurance  20c. Society:  21. +\$ 0.00  22. Calculate your monthly expenses  22a. Add lines 4 through 21.  23b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  23c. Subtract your monthly expenses from line 22c above.  23c. Subtract your monthly expenses from line 22c above.  24c. Subtract your monthly expenses from line 22c above.  25c. Subtract your monthly expenses or decrease because of a modification to the terms of your mortgage payment to increase or decrease because of a modification to the terms of your mortgage payment to increase or decrease because of a modification t				•			
13. Intertainment, clubs, recreation, newspapers, magazines, and books   13. \$   100.00	12.				12.	\$	75.00
14. \$ 0.00  15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15c. Vehicle insurance. Vehicle insurance. Vehicle insurance. Specify: 15c. Vehicle insurance. Vehicle insurance. Vehicle insurance. Vehicle insurance. Vehicle insurance	13.				13.	\$	100.00
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15d. Other insurance. Specify:  15d. S 0.00  17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  16. \$ 0.00  17b. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. \$ 0.00  17c. Car payments for Vehicle 2  17c. \$ 0.00  17c. Cher. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i).  18. \$ 0.00  19. Other payments you make to support others who do not live with you.  Specify:  19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income.  20a. Mortgages on other property  20a. \$ 0.00  20b. Real estate taxes  20b. \$ 0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20d. \$ 0.00  20d. Homeowner's association or condominium dues  20e. \$ 0.00  20fer: Specify:  21. +\$ 0.00  22. Calculate your monthly expenses  22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  23c. Calculate your monthly net income.  23a. Copy line 12 (your combined monthly income) from Schedule 1.  23a. Copy line 12 (your combined monthly income) from Schedule 1.  23a. Subtract your monthly expenses from your monthly expenses within the year after you file this form?  For example, do you expect to linish paying for your car boan within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		15b.	Health ins	surance	15b.	\$	0.00
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Specify:  17a. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other space deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). 19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20b. Specify: 20c. Property, homeowner's, or renter's insurance 20c. Calculate toxes 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 21. Other: Specify: 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add lines 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule 1. 23a. Copy line 12 (your combined monthly income) from Schedule 1. 23b. Copy your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses or decrease in your expenses within the year after you file this form? 24c. Do you expect an increase or decrease in your expenses within the year of do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		15d.	Other insu	urance. Specify:	15d.	\$	0.00
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For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?			i ne result	t is your <i>monthly net income</i> .	230.	<u> </u>	301104
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	24	Do 1/4	OII expect :	an increase or decrease in your expenses within the year afte	r vou file this	s form?	
modification to the terms of your mortgage?							ase or decrease because of a
■ No.					, , , , , , , , ,	. ,	
		■ No	0.				
☐ Yes. Explain here:				Explain here:			

11/06/20 12:49PM

Fill in this	s information to identify your	c359:			
Debtor 1	HASSAN MOHAN				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case num	ber				
(if known)				_	ck if this is an nded filing
Official	Form 106Dec				
Decla	aration About a	ın Individual	<b>Debtor's Scl</b>	hedules	12/15
,	ooth. 18 U.S.C. §§ 152, 1341, 1				
Did y	ou pay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
<b>=</b> 1	No				
	Yes. Name of person			Attach Bankruptcy Petition F	
				bedardion, and digitature (	Omolari omi 119)
	r penalty of perjury, I declare hey are true and correct.	that I have read the sum	mary and schedules filed	l with this declaration and	
X /s	s/ HASSAN MOHAMAD MO	DHAMAD	X		
	IASSAN MOHAMAD MOHA		Signature of D	Debtor 2	
Si	ignature of Debtor 1				
D	ate November 6, 2020		Date		
	,				

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

Cill in	thic inform	otion to identify you					
		ation to identify you					
Debtor	· 1	HASSAN MOHA First Name	MAD MOHAMAD  Middle Name	Last Name			
Debtor	· 2						
(Spouse	if, filing)	First Name	Middle Name	Last Name			
United	States Ban	kruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK			
Case r	number						
(if known	n)				_	Check if this is an amended filing	
Offic	cial For	m 107					
			Affairs for Indivi	iduals Filing for B	ankruptcy	4/19	
informa	ation. If mo	ore space is needed, ). Answer every que	attach a separate sheet to	are filing together, both are this form. On the top of an outlier of the top of an outlier of the top of an outlier of the top of th			
ı. W	hat is your	current marital statu	s?				
_	■ Married						
_		ied					
2. Du			lived anywhere other than	whore you live new?			
L. D.	aring the la	st 5 years, nave you	lived anywhere other thar	i where you live now :			
	No						
Ц	Yes. List	all of the places you I	ived in the last 3 years. Do	not include where you live nov	V.		
D	ebtor 1 Pri	or Address:	Dates Debtor lived there	1 Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there	
				egal equivalent in a commun evada, New Mexico, Puerto R			
	No						
	Yes. Mal	ke sure you fill out Scl	nedule H: Your Codebtors (0	Official Form 106H).			
Part 2	Explain	n the Sources of You	r Income				
I ait Z	Explair	Title Cources of Tou	i ilicollic				
Fil	I in the total	amount of income yo	u received from all jobs and	ing a business during this you all businesses, including part ve together, list it only once un	-time activities.	endar years?	
	No						
	Yes. Fill	in the details.					
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$14,000.00	☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a business		
			- 1				

Debtor 1 HASSAN MOHAMAD MOHAMAD						Case number (if known)						
					Debtor 1				D	ebtor 2		
					Sources	of income that apply.		s income e deductions and sions)	s	ources of in theck all that		Gross income (before deductions and exclusions)
			dar year: December	31, 2019 )		■ Wages, commissions, sad,048.00 onuses, tips			☐ Wages, commissions, bonuses, tips			
					☐ Opera	ting a business				Operating a	business	
		■ Wages bonuses,	s, commissions, tips		\$10,125.00		Wages, coronuses, tips	nmissions,				
	□ O <sub>F</sub>		☐ Opera	ting a business	☐ Operating a business							
	Include income regardless of whether that income is taxable. Examples of <i>other income</i> are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.  List each source and the gross income from each source separately. Do not include income that you listed in line 4.  No  Yes. Fill in the details.											
					Debtor 1				D	ebtor 2		
					Sources Describe	of income below.	each	s income from source e deductions and sions)	D	ources of in escribe belov		Gross income (before deductions and exclusions)
Pa	irt 3:	List	Certain Pa	yments You	Made Befo	ore You Filed for	Bankrup	tcy				
6.												
	•	Yes.	Debtor 1 c	or Debtor 2 of 90 days before Go to line 7	or both have bre you filed 7. each credite	e primarily consulation of the primarily consulation of the primarily consulation of the primarily consultation of the primari	umer deb	ots.  y any creditor a to  of \$600 or more a	otal of S	\$600 or more	? t you paid tha	t creditor. Do not
	0	.al:6	o Nows s	attorney for	ments for d this bankru	uptcy case.	Ü					include payments to an
	Cre	aitor'	s Name and	a Address		Dates of payme	ent	Total amount paid		mount you still owe	vvas tnis į	payment for

Best Case Bankruptcy

Debtor 1 HASSAN MOHAMAD MOHAMAD			Case number (if known)					
<i>In</i> of a	siders include your relatives; any general pa which you are an officer, director, person in	ortners; relatives of any ger control, or owner of 20% of	ey, did you make a payment on a debt you owed anyone who was an insider?  Inters; relatives of any general partners; partnerships of which you are a general partner; corporations control, or owner of 20% or more of their voting securities; and any managing agent, including one for U.S.C. § 101. Include payments for domestic support obligations, such as child support and					
	No Yes. List all payments to an insider.							
li	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
in	ithin 1 year before you filed for bankruptosider? clude payments on debts guaranteed or cos		ments or transfer a	any property on a	eccount of a de	bt that benefited an		
	No Yes. List all payments to an insider							
	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment tor's name		
Part 4	Identify Legal Actions, Repossession	ns, and Foreclosures						
Li: m	Yes. Fill in the details.			n suits, paternity a		or custody		
E N	case number DISCOVER BANK V. HASSAN M MOHAMAD SS FILE NO. D 1591/20 36467/2019	COLLECTION	CIVIL COURT OF NEW YORK QUEENS COUIC COURT SUTPHIN BLVI JAMAICA, NY	NTY CIVIL	■ Pending □ On appe			
	ithin 1 year before you filed for bankruptoneck all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.		erty repossessed, f	oreclosed, garni	shed, attached	, seized, or levied?		
C	Creditor Name and Address	Describe the Property		Date		Value of the property		
		Explain what happene	d			property		
	ithin 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your counts or refuse to make a payment because you owed a debt?  No  Yes. Fill in the details.							
C	creditor Name and Address	Describe the action the	e creditor took	Date takei	action was	Amount		
	ithin 1 year before you filed for bankruptourt-appointed receiver, a custodian, or a No Yes		erty in the possess	ion of an assigne	e for the bene	fit of creditors, a		

Deb	btor 1 HASSAN MOHAMAD MOHA	MAD	Case number (if known)					
Par	rt 5: List Certain Gifts and Contribut	ions						
	Within 2 years before you filed for bar		, did you give any gifts with a total value of more t	han \$600 per person	?			
		tenn	Describe the gifts	Dates you gave	Value			
	Gifts with a total value of more than sper person	pouu	Describe the gifts	Dates you gave the gifts	value			
	Person to Whom You Gave the Gift a Address:	nd						
14.	Within 2 years before you filed for bar  ■ No □ Yes. Fill in the details for each gift of		, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?			
	Gifts or contributions to charities that more than \$600 Charity's Name		Describe what you contributed	Dates you contributed	Value			
	Address (Number, Street, City, State and ZIP C	Code)						
Par	rt 6: List Certain Losses							
15.	Within 1 year before you filed for bank or gambling?  No Yes. Fill in the details.	cruptcy c	or since you filed for bankruptcy, did you lose anyt	thing because of the	ft, fire, other disaster,			
	Describe the property you lost and	Desc	cribe any insurance coverage for the loss	Date of your	Value of property			
	how the loss occurred	Inclu	de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	loss	lost			
Par	rt 7: List Certain Payments or Transf	ers						
16.	Within 1 year before you filed for bank consulted about seeking bankruptcy	kruptcy, or prepa	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services required		erty to anyone you			
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if No	ot You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	DAHIYA LAW OFFICES LLC 75 MAIDEN LANE SUITE 506 New York, NY 10038		\$1000.00		\$1,000.00			
17.	promised to help you deal with your of Do not include any payment or transfer t	reditors	did you or anyone else acting on your behalf pay or to make payments to your creditors? isted on line 16.	or transfer any prope	erty to anyone who			
	No							
	Yes. Fill in the details.		Description and value of any arrange	Data naverant	A			
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

Debtor 1 HASSAN MOHAMAD MOHAMAD

Case number (if known)

18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but include both outright transfers and transfers mainclude gifts and transfers that you have already No	usiness or financial affa ide as security (such as t	airs? he granting of a							
	☐ Yes. Fill in the details.									
	Person Who Received Transfer Address	Description and value of property transferred		payme	ibe any property or ents received or debts n exchange	Date transfer was made				
	Person's relationship to you			·	Ū					
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-production)		y property to a	self-settle	d trust or similar device	of which you are a				
	■ No									
	Yes. Fill in the details.									
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was made				
Par	rt 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and St	orage Unit	s					
20	Within 4 years before you filed for bondon notes				I-I !	a banafit alaasd				
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred?	, were any financial ac	counts or instr	uments ne	ld in your name, or for yo	our benefit, closed,				
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.									
	■ No									
	Yes. Fill in the details.									
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	, , , , , , , , , , , , , , , , , , ,		Date account was closed, sold,	Last balance before closing or				
	Code				moved, or transferred	transfer				
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for sec cash, or other valuables?						itory for securities,				
	■ No									
	Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it?  Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?				
22.	Have you stored property in a storage unit o	r place other than your	home within 1	year befor	e you filed for bankrupto	cy?				
	<b>-</b>									
	■ No □ Yes. Fill in the details.									
	Name of Storage Facility	Who else has or h	and accord	Doscribo	the contents	Do you still				
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, S		Describe	the contents	have it?				
		State and ZIP Code)								
Par	rt 9: Identify Property You Hold or Control f	for Someone Else								
23.	Do you hold or control any property that son for someone.	meone else owns? Incli	ude any proper	ty you borr	owed from, are storing f	or, or hold in trust				
	■ No									
	☐ Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value				
	Ohio Datalla Alicant Factoria	·								
Par	rt 10: Give Details About Environmental Info									

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 11/06/20 12:49PM

Debtor 1 HASSAN MOHAMAD MOHAMAD

Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.									
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
		<i>rardous material</i> means anything an env ardous material, pollutant, contaminant		s wa	ste, hazardous substance, toxic	substance,			
Rep	ort a	II notices, releases, and proceedings th	at you know about, regardless of wher	n the	ey occurred.				
24.	Has	any governmental unit notified you tha	t you may be liable or potentially liable	une	der or in violation of an environm	ental law?			
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Hav	e you notified any governmental unit of	any release of hazardous material?						
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
26.	Hav	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Pai	t 11:	Give Details About Your Business or	Connections to Any Business						
27.	Witl	hin 4 years before you filed for bankrupt	tcy, did you own a business or have an	ny of	f the following connections to any	y business?			
		Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
		☐ A member of a limited liability comp	pany (LLC) or limited liability partnersh	ip (l	LLP)				
		□ A partner in a partnership							
		☐ An officer, director, or managing ex	ecutive of a corporation						
		☐ An owner of at least 5% of the voting or equity securities of a corporation							
		■ No. None of the above applies. Go to Part 12.							
		Yes. Check all that apply above and fill	I in the details below for each business	s.					
	Bu	siness Name	Describe the nature of the business		Employer Identification numbe				
		dress mber, Street, City, State and ZIP Code)			Do not include Social Security number or ITIN.  Dates business existed				
28.		hin 2 years before you filed for bankrupt itutions, creditors, or other parties.	tcy, did you give a financial statement	to a	nyone about your business? Incl	ude all financial			
		No Yes. Fill in the details below.							
		me dress	Date Issued						
	(Nu	mber, Street, City, State and ZIP Code)							

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

11/06/20 12:49PM Debtor 1 HASSAN MOHAMAD MOHAMAD Case number (if known) are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ HASSAN MOHAMAD MOHAMAD Signature of Debtor 2 HASSAN MOHAMAD MOHAMAD Signature of Debtor 1 Date November 6, 2020 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	ation to identify your	case:						
Debtor 1	HASSAN MOHAI							
Debter 1	First Name	Middle Name	Last Name					
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ban	kruptcy Court for the:	FASTERN DISTR	ICT OF NEW YORK					
	intropied Court for the.		ior or new rotat					
Case number (if known)				Check if this is an amended filing				
	t of Intention		riduals Filing Under Chap	ter 7 12/15				
	ridual filing under cha		out this form it:					
you have lease You must file this whichev	<ul> <li>creditors have claims secured by your property, or</li> <li>you have leased personal property and the lease has not expired.</li> <li>(ou must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form</li> </ul>							
	ople are filing togethed date the form.	er in a joint case, bo	th are equally responsible for supplying correct	information. Both debtors must				
	nd accurate as possil ur name and case nu		needed, attach a separate sheet to this form. C	n the top of any additional pages,				
Part 1: List Yo	ur Creditors Who Hav	ve Secured Claims						
		art 1 of Schedule D	: Creditors Who Have Claims Secured by Prope	rty (Official Form 106D), fill in the				
information bel	ow. ditor and the property	that is collateral	What do you intend to do with the property th secures a debt?	nat Did you claim the property as exempt on Schedule C?				
	merican Honda Fina	ance	☐ Surrender the property.	□ No				
name:			<ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a</li></ul>	■ Yes				
Description of	Automobile		Reaffirmation Agreement.					
property securing debt:			☐ Retain the property and [explain]:					
Day O		- I Danier and a Lander						
For any unexpired in the information	below. Do not list re	ease that you listed al estate leases. Un	in Schedule G: Executory Contracts and Unexp expired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p	the lease period has not yet ended.				
Describe your ur	nexpired personal pro	perty leases		Will the lease be assumed?				
Lessor's name:				□ No				
Description of leas	sed			_				
Property:				☐ Yes				
Lessor's name:	d			□ No				
Description of lease Property:	sed			☐ Yes				
Lessor's name:				□ No				
Official Form 108		Statement of In	tention for Individuals Filing Under Chapter 7	page 1				

De	btor 1 H	IASSAN MOHAMAD MOHAMAD	Case number (if known)	
	scription o	of leased		☐ Yes
De	ssor's nam scription coperty:			□ No
De	ssor's nam scription coperty:			□ No □ Yes
De	ssor's nam scription o operty:			□ No
De	ssor's nam scription o operty:			□ No
Pa	rt 3: Sig	gn Below		
		ty of perjury, I declare that I have indicat t is subject to an unexpired lease.	ted my intention about any property of my estate that sec	ures a debt and any personal
X		SSAN MOHAMAD MOHAMAD	X	
		AN MOHAMAD MOHAMAD re of Debtor 1	Signature of Debtor 2	
	Date	November 6, 2020	Date	

Fill in this information to identify your case:	Check one box only as directed in this form and in Form
Debtor 1 HASSAN MOHAMAD MOHAMAD	122A-1Supp:
Debtor 2 (Spouse, if filing)	■ 1. There is no presumption of abuse
United States Bankruptcy Court for the: Eastern District of New York  Case number	□ 2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means Test Calculation</i> (Official Form 122A-2).
(if known)	☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
	☐ Check if this is an amended filing
Official Form 122A - 1 Chapter 7 Statement of Your Current Mo	nthly Income 04/20
Be as complete and accurate as possible. If two married people are filing togethe attach a separate sheet to this form. Include the line number to which the additic case number (if known). If you believe that you are exempted from a presumptio qualifying military service, complete and file Statement of Exemption from Presu	onal information applies. On the top of any additional pages, write your name and n of abuse because you do not have primarily consumer debts or because of
Part 1: Calculate Your Current Monthly Income	

■ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.

□ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					Colu Debt	mn A tor 1	Colum Debto non-fi	
	our gross wages, salary, tips, bonuses, overtime, a ayroll deductions).	ınd co	ommissi	ons (before all	\$	2,400.00	\$	0.00
	<b>llimony and maintenance payments.</b> Do not include polumn B is filled in.	oayme	ents from	a spouse if	\$	0.00	\$	0.00
<b>o</b> f fro ar	Il amounts from any source which are regularly pair fyou or your dependents, including child support. om an unmarried partner, members of your household, nd roommates. Include regular contributions from a spouled in. Do not include payments you listed on line 3.	Includ your	de regula: depende	r contributions ints, parents,	\$	0.00	\$	0.00
5. <b>N</b>	let income from operating a business, profession, o	or farr						
				otor 1				
G	Fross receipts (before all deductions)	\$_	0.00					
0	Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00					
N	let monthly income from a business, profession, or farm	ո \$	0.00	Copy here ->	\$	0.00	\$	0.00
6. <b>N</b>	let income from rental and other real property							
			Dek	otor 1				
G	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	<b>-</b> \$	0.00					
	let monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	0.00
	nterest, dividends, and royalties	. –			\$	0.00	\$	0.00

What is your marital and filing status? Check one only.
 Not married. Fill out Column A, lines 2-11.

☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

■ Married and your spouse is NOT filing with you. You and your spouse are:

HASSAN MOHAMAD MOHAMAD Debtor 1 Case number (if known) Column B Column A Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse \$ 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. 0.00 0.00 \$ 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 2,400.00 0.00 2,400.00 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 2.400.00 Multiply by 12 (the number of months in a year) x 12 28.800.00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: NY Fill in the state in which you live. Fill in the number of people in your household. 5 116.550.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: Sian Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ HASSAN MOHAMAD MOHAMAD

Debtor 1	HASSAN MOHAMAD MOHAMAD	Case number (if known)
	Signature of Debtor 1	
Dat	November 6, 2020 MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.	
	If you checked line 14b, fill out Form 122A-2 and file it with this form	ı.

11/06/20 12:49PM

B2030 (Form 2030) (12/15)

# United States Rankruntcy Court

		stern District of New Yor			
In	re HASSAN MOHAMAD MOHAMAD		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	ENSATION OF ATTOI	RNEY FOR DE	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	1,000.00	
	Prior to the filing of this statement I have received	1	\$	1,000.00	
	Balance Due			0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed com	npensation with any other person	unless they are mem	bers and associates of my law firm.	
	☐ I have agreed to share the above-disclosed compencopy of the agreement, together with a list of the n				
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	<ul> <li>a. Analysis of the debtor's financial situation, and reneb.</li> <li>b. Preparation and filing of any petition, schedules, st.</li> <li>c. Representation of the debtor at the meeting of credit d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applicat 522(f)(2)(A) for avoidance of liens on heads.</li> </ul>	atement of affairs and plan which itors and confirmation hearing, and reduce to market value; exc ions as needed; preparation	n may be required; and any adjourned hea emption planning;	rings thereof; preparation and filing of	
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dany other adversary proceeding.	fee does not include the following lischargeability actions, judi	g service: cial lien avoidanc	es, relief from stay actions or	
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of a sbankruptcy proceeding.	any agreement or arrangement for	payment to me for r	epresentation of the debtor(s) in	
	November 6, 2020	/s/ Karamvir Dahi	iva		
Date		Karamvir Dahiya Signature of Attorne Dahiya Law Offic 75 Maiden Lane S New York	ey es, LLC		
		New York, NY 10 2127668000 Fax karam@bankrup	: 2127668001		
		Name of law firm			

# **United States Bankruptcy Court Eastern District of New York**

In re	HASSAN MOHAMAD MOHAMAD		Case No.	
		Debtor(s)	Chapter	7

## **VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

USBC-44 Rev. 9/17/98

American Honda Finance Attn: National Bankruptcy Center Po Box 166469 Irving, TX 75016

Cavalry Portfolio Services 500 Summit Lake Suite 400 Valhalla, NY 10595

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

MRS BPO LLC 1930 Olney Avenue Cherry Hill, NJ 08003

Portfolio Recovery Attn: Bankruptcy 120 Corporate Blvd Norfolk, VA 23502

Portfolio Recovery Assoc. P.O. Box 12914 Norfolk, VA 23541

Selip & Stylianou, LLP PO Box 9012 Woodbury, NY 11797

Wells Fargo Bank NA Attn: Bankruptcy 1 Home Campus Mac X2303-01a Des Moines, IA 50328

Wells Fargo Bank NA Attn: Bankruptcy Po Box 10438 Des Moines, IA 50306

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

# STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

<b>DEBTOR(S):</b>	HASSAN MOHAMAD MOHAM	/IAD	CASE NO.:.
		(b), the debtor (or any other petition) owledge, information and belief:	tioner) hereby makes the following disclosure
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before thes; (iii) are affiliates, as defined or more of its general partners;	in 11 U.S.C. § 101(2); (iv) are go (vi) are partnerships which share ither of the Related Cases had, an	the debtors in such cases: (i) are the same; (ii) are the same; (ii) are the same; (iv) are a one or more common general partners; or (vii) in interest in property that was or is included in the
NO RELATED	CASE IS PENDING OR HAS E	BEEN PENDING AT ANY TIME	3.
☐ THE FOLLOW	ING RELATED CASE(S) IS PE	NDING OR HAS BEEN PENDI	NG:
1. CASE NO.:	JUDGE: DISTRICT	'/DIVISION:	
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:	<u> </u>
CURRENT STATI	US OF RELATED CASE:		
		(Discharged/awaiting discharged/awaiting disch	arge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (1	Refer to NOTE above):	
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY	") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	'/DIVISION:	
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:	<u> </u>
CURRENT STATI	US OF RELATED CASE:		
		(Discharged/awaiting discharged/awaiting disch	arge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (1	Refer to NOTE above):	
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY	") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	VDIVISION:	
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:	

DISCLOSURE OF RELATED CASES (cont'd)			
` ,			
CURRENT STATUS OF RELATED CASE: (Disc	charged/awaiting discharge, confirmed, dismissed, etc.)		
MANNED IN WHICH CASES ARE DELATED (Palaries N	OTE above)		
MANNER IN WHICH CASES ARE RELATED (Refer to N	OTE above):		
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A SCHEDULE "A" OF RELATED CASE:	" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN		
NOTE: Pursuant to 11 U.S.C. § 109(g), certain individuals whose eligible to be debtors. Such an individual will be required	no have had prior cases dismissed within the preceding 180 days may not to file a statement in support of his/her eligibility to file.		
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTO	RNEY, AS APPLICABLE:		
I am admitted to practice in the Eastern District of New York	(Y/N): <u>Y</u>		
I certify under penalty of perjury that the within bankruptcy cas indicated elsewhere on this form.	ase is not related to any case now pending or pending at any time, except		
/s/ Karamvir Dahiya	_		
Karamvir Dahiya Signature of Debtor's Attorney Dahiya Law Offices, LLC 75 Maiden Lane Suite 506	Signature of Pro Se Debtor/Petitioner		
New York New York, NY 10038 2127668000 Fax:2127668001	Signature of Pro Se Joint Debtor/Petitioner		
	Mailing Address of Debtor/Petitioner		
	City, State, Zip Code		
Failure to fully and truthfully provide all information required	Area Code and Telephone Number		

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.